## <u>APPLICATION FOR APPROVAL OF PROFESSIONAL EDUCATION COURSE</u>

## Submit completed package to: Kentucky Department of Financial Institutions Attn: Chris Thompson 1025 Capital Center Drive, Suite 200 Frankfort, KY 40601

## Please read carefully and complete all requested information

Application is hereby made for the approval of the following course as an approved continuing education course pursuant to KRS 286.8-.260(5):

Telephone Number:  E-Mail address:  WEB address:  List all other states where the entity is approved as a mortgage originator continuin education provider (attach evidence of approval):  List the names and attach resumes for all course instructors:  Please list name, direct phone number and e-mail of person to contact for: a: Course content: b: Class rolls:  Name of course:  Please include the following information:  Course handbook/workbook  Handouts  Instructor  Sample test (if applicable)  Course schedule specifically identifying time allotments for each topic.  Class format (classroom/online)	Nar	me and Address of company/provider:
WEB address:  List all other states where the entity is approved as a mortgage originator continuing education provider (attach evidence of approval):  List the names and attach resumes for all course instructors:  Please list name, direct phone number and e-mail of person to contact for:  a: Course content:  b: Class rolls:  Name of course:  Please include the following information:  Course handbook/workbook  Handouts  Instructor  Sample test (if applicable)  Course schedule specifically identifying time allotments for each topic.	Tel	ephone Number:
List all other states where the entity is approved as a mortgage originator continuing education provider (attach evidence of approval):  List the names and attach resumes for all course instructors:  Please list name, direct phone number and e-mail of person to contact for:  a: Course content:  b: Class rolls:  Name of course:  Please include the following information:  Course handbook/workbook  Handouts  Instructor  Sample test (if applicable)  Course schedule specifically identifying time allotments for each topic.	E-N	Mail address:
education provider (attach evidence of approval):  List the names and attach resumes for all course instructors:  Please list name, direct phone number and e-mail of person to contact for: a: Course content: b: Class rolls:  Name of course:  Please include the following information:  Course handbook/workbook  Handouts  Instructor  Sample test (if applicable)  Course schedule specifically identifying time allotments for each topic.	WE	EB address:
List the names and attach resumes for all course instructors:  Please list name, direct phone number and e-mail of person to contact for: a: Course content: b: Class rolls:  Name of course:  Please include the following information: Course handbook/workbook Handouts Instructor Sample test (if applicable) Course schedule specifically identifying time allotments for each topic.		cation provider (attach evidence of approval):
a: Course content: b: Class rolls:  Name of course:  Please include the following information: Course handbook/workbook Handouts Instructor Sample test (if applicable) Course schedule specifically identifying time allotments for each topic.	List	t the names and attach resumes for all course instructors:
Name of course:  Please include the following information:  Course handbook/workbook  Handouts  Instructor  Sample test (if applicable)  Course schedule specifically identifying time allotments for each topic.	a: (	Course content:
Course handbook/workbook Handouts Instructor Sample test (if applicable) Course schedule specifically identifying time allotments for each topic.		
	Plea	Course handbook/workbook Handouts Instructor Sample test (if applicable)
Any other relevant information.		Course schedule specifically identifying time allotments for each topic. Class format (classroom/online)

- \* Six of the required twelve hours of annual continuing education can be provided online. If you plan to offer online courses, it will be necessary to submit your online security measures for approval prior to offering any courses. The measures should address the following:
  - 1. Identification of person taking course
  - 2. Timing function
  - 3. Testing controls
  - 4. Server security
  - 5. Back-up system security
- \*\* Additional Requirements for Continuing Education Providers:

After each course is concluded, a certificate should be given to each attendee indicating the name of the course and the number of continuing education hours earned. Additionally, a roster of attendees should be submitted to the Office including the following information:

- 1. Name, Home Address, and Social Security Number of Attendee
- 2. Name and Address of Employer of Attendee
- \*\*\* Continuing education providers shall provide free access to Office personnel to monitor continuing education programs. Continuing education providers shall also retain original records of attendance for each continuing education program conducted by the continuing education provider for a period of two years from the date of the course and shall provide the Office with access to such records upon request (this recordkeeping requirement is in addition to the reporting requirement).
- \*\*\*\* Continuing education programs that will be considered for approval are those programs that contribute directly to the enhancement of the professional competence of a mortgage professional to engage in the mortgage loan business. Acceptable continuing education programs do not include programs that instruct in matters such as office or business management, personnel management, or similar subjects not directly related to the mortgage loan business.

I,	, hereby declare on my oath that I have executed this			
application for approval as a corapplication are true and correct.	ntinuing education provider/course and that the facts stated in this			
Partner or Officer Signature	Subscribed and sworn to before me this day of, 20			
My Commission Expires:	Notary Public – State at Large			

**Note:** Continuing education providers doing business in Kentucky are required to register with the Kentucky State Board for Proprietary Education. You can contact the Board at 502-564-3296, extension 227 regarding their registration requirements.